

REQUEST FOR PATENT FEE REFUND										
1 Date of Request: <u>62499</u>		2 Serial/Patent # <u>09294689</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED							
<input checked="" type="checkbox"/> Filing			6 AMOUNT \$ <u>380</u>							
<input type="checkbox"/> Amendment			\$							
<input type="checkbox"/> Extension of Time			\$							
<input type="checkbox"/> Notice of Appeal/Appeal			\$							
<input type="checkbox"/> Petition			\$							
<input type="checkbox"/> Issue			\$							
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$							
<input type="checkbox"/> Maintenance			\$							
<input type="checkbox"/> Assignment			\$							
<input type="checkbox"/> Other			\$							
		7 TOTAL AMOUNT OF REFUND \$ <u>380</u>								
		8 TO BE REFUNDED BY:								
		<input type="checkbox"/> Treasury Check								
		<input type="checkbox"/> Credit Deposit A/C #:								
		9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"><tr><td>5</td><td>0</td><td>--</td><td>0</td><td>8</td><td>5</td><td>6</td></tr></table>		5	0	--	0	8	5	6
5	0	--	0	8	5	6				
10 REASON:										
<input checked="" type="checkbox"/> Overpayment										
<input type="checkbox"/> Duplicate Payment										
<input type="checkbox"/> No Fee Due (Explanation):										
<u>Small Entity Status must be submitted</u>										
11 REFUND REQUESTED BY: <u>E. N. ...</u>										
TYPED/PRINTED NAME: <u>E. N. ...</u>		TITLE: <u>VICE</u>								
SIGNATURE: <u>[Signature]</u>		PHONE: <u>308 9483</u>								
OFFICE: _____										
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****										
APPROVED: _____		DATE: _____								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: